

**AUTHORIZATION TO CANCEL REGISTRATION  
NEW WISCONSIN RESIDENTS**

\_\_\_\_\_  
(Name of person authorizing cancellation of voter registration)

It is my intent to vote for President and Vice President in Wisconsin, under §.6.15, Wis. Stats.

☐ I authorize the cancellation of my voting privileges at the following address:

\_\_\_\_\_  
(Former street address)

\_\_\_\_\_  
(Town, Village, or City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Zip Code)

☐ I am not registered to vote at my previous address.

Date \_\_\_\_\_

\_\_\_\_\_  
(Signature of new Wisconsin resident)

\_\_\_\_\_  
(Present Address)

GAB-139 (Rev.4/92) (Ref. 1/98)  
§.6.15(2)(b), Stats.

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